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EXAMINER



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COVER LETTER

TO:

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Registration Section
Division of Corporations

SUBJECT: Investment Partners Unlimited LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Hickey

Name of Person

Investment Partners Unlimited LLC

Firm/Company

701 W. Cypress Creek Rd #102

Address

Ft Lauderdale, FL 33309

City/State and Zip Code

mhickey@csc-corp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Hickey

_{at}(954)548-3208

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Investment Partners Unlim		appears on our records	
(A	Liability Company as it now Florida Limited Liability Con	npany)	
The Articles of Organization for this Limited Li Florida document number L12000044952	ability Company were filed	on <u>3-30-12</u>	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability compa	any here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability	Company," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applic	able:	AL CONTRACTOR OF THE PROPERTY	. 73
(Principal office address MUST BE A STREE	T ADDRESS)	\$= 25 Tr	2 11
		SS	29
		رن العام المارية العام	
Enter new mailing address, if applicable:		——————————————————————————————————————	\sim
(Mailing address MAY BE A POST OFFICE BOX)		∑ > □	0_
B. If amending the registered agent and/oregistered agent and/or the new registered of		ss on our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:	CSC Holdings LLC		
New Registered Office Address:	701 W. Cypress Cre		
		Enter Florida street addre	ess.
	Ft Lauderdale	, Florida <u>33</u> 3	109
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	ype of Action
MGRM	Surfview Holdings LLC	701 West Cypress Creek Rd #102	Add
		Ft Lauderdale, FL 33309	Remove
MGRM	CSC Holdings LLC	701 West Cypress Creek Rd #102	Add
		Ft Lauderdale, FL 33309	Remove
			- Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

. If amending any other info	ormation, enter change(s) here: (Attach additional sheets, if necessary.)
November 27	, 2012
	Sal
	Signature of a member or authorized representative of a member
	Typed of printed name of signee

Page 3 of 3

Filing Fee: \$25.00